

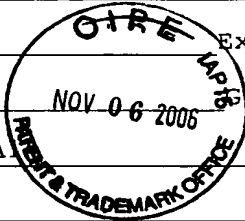
**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s): William C. Olson and Paul J. Maddon

Serial No. : 09/594,983 Examiner: B. Peng

Filed : June 15, 2000 Group Art Unit: 1648

For : CCR5 ANTIBODY PA



Mail Stop Amendment  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Date: November 3, 2006

Sir:

Transmitted herewith is an amendment to the above-identified application.

X Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been previously established.

       A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

       No additional fee is required.

The filing fee is calculated as follows:

	Number after Amendment	Highest Number Previously Paid For <sup>1</sup>	Number of Extra Claims Presented	RATE			FEE	
				Small Entity	Other Entity		Small Entity	Other Entity
Total Claims	29 -	* 31 =	*** 0 x	\$25	\$50	=	0	
Independent Claims	4 -	** 4 =	*** 0 x	\$100	\$200	=	0	
Multiple Dependent Claim(s) Presented For First Time <u>      </u> Yes <u>X</u> No				\$180	\$360	=	0	
				TOTAL ADDITIONAL FEE \$ 0.00				

<sup>1</sup> The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.

\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

\*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

\*\*\* If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

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Amendment Transmittal Letter  
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The following are also enclosed:

- ☒ One additional copy of this Amendment Transmittal Letter
- ☒ Return Receipt Postcard
- ☐ An Information Disclosure Statement, including Form PTO-1449  
(Copies of citations included: Yes ☐ No ☐  
and a fee of \$ ☐ included)
- ☐ A Petition for an Extension of Time, including a fee of  
\$ ☐ for a Petition for ☐ Month(s) Extension of Time
- ☒ Other (identify): Terminal Disclaimer and fee of \$65.00

THE TOTAL FEE DUE IS \$ 65.00.

- ☒ A check in the amount of \$ 65.00 is enclosed.
- ☐ Please charge Deposit Account No. ☐ in the amount of  
\$ ☐.
- ☒ The Commissioner is hereby authorized to charge any additional fees  
required or credit any overpayment to Deposit Account No. 03-3125  
as follows:
- ☒ Fees under 37 C.F.R. \$1.16 for the presentation of extra claims
- ☐ Patent application processing fees under 37 C.F.R. \$1.17

Respectfully submitted,



John P. White  
Registration No. 28,678  
Attorney for Applicant(s)  
Cooper & Dunham LLP (Customer #23432)  
1185 Avenue of the Americas  
New York, New York 10036  
(212) 278-0400

I hereby certify that this  
correspondence is being deposited this  
date with the U.S. Postal Service with  
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Alexandria, VA 22313-1450.

 11/3/06  
John P. White Date  
Reg. No. 28,678